

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

American College of Cardiology Political Action Committee

ADDRESS (number and street) ▼

2400 N St NW

☐ Check if different than previously reported. (ACC)

Washington

DC

20037-1153

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00375360

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☒ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
11 27 2012

through

M M M / D D D / Y Y Y Y Y Y
12 31 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Carlton G. Davids

Signature of Treasurer

Carlton G. Davids

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
01 31 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
11 / 27 / 2012 To: M M / D D / Y Y Y Y Y Y
12 / 31 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		46353.91
(b) Cash on Hand at Beginning of Reporting Period.....	44238.15	
(c) Total Receipts (from Line 19)	61101.53	538495.38
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	105339.68	584849.29
7. Total Disbursements (from Line 31)	33980.39	513490.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	71359.29	71359.29
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 11 / 27 / 2012

To:

 M M / D D / Y Y Y Y Y
 12 / 31 / 2012
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

52731.32

444517.97

(ii) Unitemized

7095.09

72477.27

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

59826.41

516995.24

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

59826.41

516995.24

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

1275.12

21000.14

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

500.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

61101.53

538495.38

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

61101.53

538495.38

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1480.39	21031.67
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1480.39	21031.67
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30000.00	487000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	2500.00	5458.33
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	2500.00	5458.33
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	33980.39	513490.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33980.39	513490.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	59826.41	516995.24
34. Total Contribution Refunds (from Line 28(d))	2500.00	5458.33
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	57326.41	511536.91
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	1480.39	21031.67
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1275.12	21000.14
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	205.27	31.53

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 72
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jesse E. Adams III, M.D.,Mailing Address 1205 Isleworth Dr
Ste 400

City	State	Zip Code
Louisville	KY	40245-5221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Cardiologists

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2012

Transaction ID : 41C2841D3D3C3115D493

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

B. Jesse E. Adams III, M.D.,Mailing Address 1205 Isleworth Dr
Ste 400

City	State	Zip Code
Louisville	KY	40245-5221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Cardiologists

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2012

Transaction ID : 4BB38F065E353799B904

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

C. Alexander Adler M.D., F.A.

Mailing Address 117 E Hanover Pl

City	State	Zip Code
Peoria	IL	61614-2119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Methodist Medical Center

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2012

Transaction ID : 22EB06AC232A81BEDC5

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

333.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 72
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ajay K. Agarwala M.D., F.A.

Mailing Address 1376 Plymouth Rd

City	State	Zip Code
Bridgewater	NJ	08807-1410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Robert Wood Johnson Hospital

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	17	/	2012

Transaction ID : 4846EA37B6EFC9AA544

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Naser Ahmadi M.D., F.A.

Mailing Address 2719 W 235th St

City	State	Zip Code
Torrance	CA	90505-4254

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of California (UCLA)

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2012

Transaction ID : 3566963D59CFF6E23A1

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

c. Jay H. Alexander M.D., F.A.

Mailing Address 2256 Carlyle Ct

City	State	Zip Code
Buffalo Grove	IL	60089-4695

FEC ID number of contributing
federal political committee.

C

Name of Employer

North Shore Cardiologists, SC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2012

Transaction ID : 47EAAA83DAA9FB8C54B9

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

865.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 72
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jay H. Alexander M.D., F.A.

Mailing Address 2256 Carlyle Ct

City

Buffalo Grove

State

IL

Zip Code

60089-4695

FEC ID number of contributing
federal political committee.

C

Name of Employer

North Shore Cardiologists, SC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2900.00

Date of Receipt

12 / 30 / 2012

Transaction ID : 4A929FD79FF472409ABD

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Harvey L. Alpern M.D., F.A.

Mailing Address 1223 Wilshire Blvd
756

City

Santa Monica

State

CA

Zip Code

90403-5400

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

12 / 12 / 2012

Transaction ID : 02647EBB19485DDACA6

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

C. Rene J. Alvarez Jr., M.D.,

Mailing Address 425 McKean Dr

City

Wexford

State

PA

Zip Code

15090-7327

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Pittsburgh Medical Cente

Occupation

HEART FAILURE/TRANSPLANT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

12 / 21 / 2012

Transaction ID : 49DA8B9E023BB3E01380

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

698.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Janet E. Anderson M.D., F.A.

Mailing Address 3745 11th Cir
Ste 105

City Vero Beach State FL Zip Code 32960-4838

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

12 / 31 / 2012

Transaction ID : C1BAB65EA2F741DD1CB

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Brad G. Angeja M.D., F.A.

Mailing Address 865 44th Ave

City San Francisco State CA Zip Code 94121-3307

FEC ID number of contributing federal political committee.

C

Name of Employer

Palo Alto Medical Foundation

Occupation

NON-INVASIVE CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

12 / 18 / 2012

Transaction ID : 4A94AC082FF7962F5C71

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

c. Thomas E. Arend Jr., COO

Mailing Address 2400 N St NW

City Washington State DC Zip Code 20037-1153

FEC ID number of contributing federal political committee.

C

Name of Employer

American College of Cardiology

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

12 / 18 / 2012

Transaction ID : 4024BDD5BBD751F1DFD0

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1020.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 72

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. James W. Asaph M.D., F.A.

Mailing Address 4401 SW Westdale Dr

City

Portland

State

OR

Zip Code

97221-3158

FEC ID number of contributing
federal political committee.

C

Name of Employer

Earle A Chiles Research Institute

Occupation

CARDIOVASC. SURG.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / 30 / 2012

Transaction ID : BD8B551C1334FE0F88A

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Fayaz Asghar M.B.B.S.,

Mailing Address 22335 Regnart Rd

City

Cupertino

State

CA

Zip Code

95014-4824

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

11 / 30 / 2012

Transaction ID : 9654B60D6EEB4426148

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

C. Constantine L. Athanasuleas M.D., F.A.

Mailing Address 1530 3rd Ave S

Tht 720

City

Birmingham

State

AL

Zip Code

35294-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Alabama At Birmingham

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 12 / 2012

Transaction ID : B7DBCE22A0B2FB4E198

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

815.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 72

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Darla Bakersmith-Hess M.D., F.A.

Mailing Address PO Box 71

City	State	Zip Code
Franklin	PA	16323

FEC ID number of contributing
federal political committee.

C

Name of Employer

UPMC Cardiovascular Institute

Occupation

ECHOCARDIOGRAPHY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	12	/	2012

Transaction ID : E46A26B3F25958BCFD8

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Christopher L. Baldi D.O., F.A.

Mailing Address 37 Oxford Way

City	State	Zip Code
Wilmington	DE	19807-2578

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	18	/	2012

Transaction ID : 4537380B-B20D-4F2F-

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Michael A. Balk M.D., F.A.Mailing Address 5670 Peachtree Dunwoody Rd NE
Ste 880

City	State	Zip Code
Atlanta	GA	30342-4789

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northside Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	17	/	2012

Transaction ID : 6E806828-008E-4DBF-

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

600.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 72

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Eric R. Bates M.D., F.A.

Mailing Address 840 Cherrystone Ct

City

Ann Arbor

State

MI

Zip Code

48105-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Michigan Hospitals and H

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

11 / 28 / 2012

Transaction ID : 4C9F9731AAD0F360C445

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Eric R. Bates M.D., F.A.

Mailing Address 840 Cherrystone Ct

City

Ann Arbor

State

MI

Zip Code

48105-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Michigan Hospitals and H

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

12 / 28 / 2012

Transaction ID : 446F9E9236E018084C31

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. Calvin A. Bell M.D., F.A.

Mailing Address 1720 Gunbarrel Rd
Ste 300

City

Chattanooga

State

TN

Zip Code

37421-3192

FEC ID number of contributing
federal political committee.

C

Name of Employer

Center for Cardiovascular Health

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

12 / 12 / 2012

Transaction ID : 41D0F726786F5DEA828

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1166.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. William R. Bennett M.D., F.A.

Mailing Address 122 W 7th Ave
Ste 310

City State Zip Code
Spokane WA 99204-2352

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Clinics Northwest

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

12 / 12 / 2012

Transaction ID : 9EAD82B578E4C7C4C99

Amount of Each Receipt this Period

280.00

Full Name (Last, First, Middle Initial)

B. Joe Knight Bissett M.D., F.A.

Mailing Address PO Box 7374

City State Zip Code
Little Rock AR 72217-7374

FEC ID number of contributing
federal political committee.

C

Name of Employer

UAMS Dept of Medicine Central AR VA Hos

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

12 / 14 / 2012

Transaction ID : E227DFC2C8BF37614DF

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Kathleen Blake M.D., F.A.

Mailing Address 15 Charles Plz
Apt 1402

City State Zip Code
Baltimore MD 21201-3941

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.07

Date of Receipt

12 / 13 / 2012

Transaction ID : 4DE1A9F07BC0685F79A3

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1363.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. William J. Bommer M.D., F.A.

Mailing Address 4860 Y St
Ste 2820

City State Zip Code
Sacramento CA 95817-2307

FEC ID number of contributing
federal political committee.

C

Name of Employer

UC Davis, Medical Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.08

Date of Receipt

12 / 21 / 2012

Transaction ID : 47CA80E44D9149A91175

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

B. Alfred A. Bove M.D., Ph.D

Mailing Address 110 Anton Rd

City State Zip Code
Wynnewood PA 19096-1226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Temple University Hospital

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

12 / 09 / 2012

Transaction ID : 449C8FED53D7A2BE27EF

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Ralph G. Brindis M.D., M.P.

Mailing Address 1410 Monterey Blvd

City State Zip Code
San Francisco CA 94127-2554

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kaiser Foundation Hospital

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.70

Date of Receipt

11 / 28 / 2012

Transaction ID : 4FB58E5AF195FC895628

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

204.18

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ralph G. Brindis M.D., M.P.

Mailing Address 1410 Monterey Blvd

City

San Francisco

State

CA

Zip Code

94127-2554

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kaiser Foundation Hospital

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			28			2012			

Transaction ID : 4B6DABC7F2304C0641BE

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Alan S. Brown M.D., F.A.

Mailing Address 1912 Alta Vista Ct

City

Naperville

State

IL

Zip Code

60563-1815

FEC ID number of contributing
federal political committee.

C

Name of Employer

Midwest Heart SpecialistsEdward Heart

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			29			2012			

Transaction ID : 439A95D7C503D131515E

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Alan S. Brown M.D., F.A.

Mailing Address 1912 Alta Vista Ct

City

Naperville

State

IL

Zip Code

60563-1815

FEC ID number of contributing
federal political committee.

C

Name of Employer

Midwest Heart SpecialistsEdward Heart

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			29			2012			

Transaction ID : 4123A000498550E07F2F

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

283.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Joseph G. Cacchione M.D., F.A.

Mailing Address 5740 Hickory Knoll Ct

City

Fairview

State

PA

Zip Code

16415-3246

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cleveland Clinic Foundation

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

12 / 21 / 2012

Transaction ID : 49909538E353226F316E

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Daniel Carey M.D., F.A.

Mailing Address 2410 Atherholt Rd

City

Lynchburg

State

VA

Zip Code

24501-2148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Centra Stroobants Heart Center

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 22 / 2012

Transaction ID : 25F1EF9F-103D-4ADA-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Peter J. Chaille M.D., F.A.

Mailing Address 427 Chestnut Forest Cv

City

Fort Wayne

State

IN

Zip Code

46814-8926

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.92

Date of Receipt

12 / 03 / 2012

Transaction ID : 4355860AEBC9E12F2164

Amount of Each Receipt this Period

41.66

SUBTOTAL of Receipts This Page (optional)..... ►

625.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sarma S. Challa M.B.B.S.,

Mailing Address 220 Rollingwood Cir

City

Baytown

State

TX

Zip Code

77520-1146

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 11 / 2012

Transaction ID : AC1B1BCEB49ABF26AAB

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Anthony T. Chapekis M.D., F.A.

Mailing Address 5391 Reserve Dr

City

Dublin

State

OH

Zip Code

43017-8620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mid Ohio Card. Consults.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

12 / 21 / 2012

Transaction ID : 9B8A47C24F142560BFD

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

c. Hollace D. Chastain II, M.D.,

Mailing Address 1819 Braemar Dr

City

Fort Wayne

State

IN

Zip Code

46814-9364

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fort Wayne Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

11 / 29 / 2012

Transaction ID : 4173A912C54C49362D50

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

715.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hollace D. Chastain II, M.D.,

Mailing Address 1819 Braemar Dr

City

Fort Wayne

State

IN

Zip Code

46814-9364

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fort Wayne Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2012

Transaction ID : 4CD18B99A3AB67768992

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Richard A. Chazal M.D., F.A.

Mailing Address 671 N Town and River Dr

City

Fort Myers

State

FL

Zip Code

33919-5931

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Heart Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 07 / 2012

Transaction ID : 45769BB4AE4511F07422

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

C. Bernard A. Clark III, M.D.,

Mailing Address 95 Johnny Cake Ln

City

Glastonbury

State

CT

Zip Code

06033-2545

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Francis Hospital and Medical Cente

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 29 / 2012

Transaction ID : 40D48713656598F218AC

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

233.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bernard A. Clark III, M.D.,

Mailing Address 95 Johnny Cake Ln

City

Glastonbury

State

CT

Zip Code

06033-2545

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Francis Hospital and Medical Cente

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	29	/	2012

Transaction ID : 401087CDB12D408A0C15

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Stephan G. Cokinos M.D., F.A.

Mailing Address 19 Hilltop Dr

City

Melville

State

NY

Zip Code

11747-2016

FEC ID number of contributing
federal political committee.

C

Name of Employer

South Bay Cardiovascular Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	14	/	2012

Transaction ID : E8547BD94B2AC85CFAC

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

C. Brian Cole M.D., F.A.

Mailing Address 201 E Dr Hicks Blvd

City

Florence

State

AL

Zip Code

35630-5767

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Health Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	11	/	2012

Transaction ID : 0C29BC50-ECBC-48D8-

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

1415.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jason H. Cole M.D., M.S.

Mailing Address 3715 Dauphin St
Ste 4400

City State Zip Code
Mobile AL 36608-1727

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 22 / 2012

Transaction ID : 871FC02E-3629-43DB-

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Lianna S. Collinge, CAE CAE, Unkno

Mailing Address 4014 88th Ave NW

City State Zip Code
Gig Harbor WA 98335-6157

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Washington Chapter of the ACC

ADMINISTRATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1078.00

Date of Receipt

12 / 14 / 2012

Transaction ID : 4FEA9AFF8F9B3BBE83CD

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

C. James L. Comazzi M.D., F.A.

Mailing Address 900 Greenley Rd
Ste 911

City State Zip Code
Sonora CA 95370-5287

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

12 / 04 / 2012

Transaction ID : 0B1E6D62-473C-46D6-

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1340.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. James L. Comazzi M.D., F.A.

Mailing Address 900 Greenley Rd
Ste 911

City State Zip Code
Sonora CA 95370-5287

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 04 2012

Transaction ID : 7430D37E-6B01-4148-

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. James L. Comazzi M.D., F.A.

Mailing Address 900 Greenley Rd
Ste 911

City State Zip Code
Sonora CA 95370-5287

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 04 2012

Transaction ID : EE3C1BEB-7834-4154-

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

c. Stephen L. Cook M.D., F.A.

Mailing Address 3311 Riverbend Dr
Ste 300

City State Zip Code
Springfield OR 97477-8800

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oregon Cardiology P.C.

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 21 2012

Transaction ID : 63E82782-5DA8-4D9B-

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Christopher J. Cooper M.D., F.A.

Mailing Address 3000 Arlington Ave
MS 1118

City State Zip Code
Toledo OH 43614-2595

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Toledo

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 08 2012

Transaction ID : C4DECC74-625D-4ECA-

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. John T. Coppola M.D., F.A.

Mailing Address 15 Candlelight Dr

City State Zip Code
Holmdel NJ 07733-2363

FEC ID number of contributing
federal political committee.

C

Name of Employer

New York Cardiology Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 14 2012

Transaction ID : EBAB246ED255A959865

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. George H. Crossley III, M.D.,

Mailing Address 276 Stratton Pl

City State Zip Code
Brentwood TN 37027-4228

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Thomas Heart

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 09 2012

Transaction ID : 4012987DEDB374680762

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 72
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. David W. Cundey M.D., F.A.

Mailing Address 30 Holley Lake Cir

City State Zip Code
Aiken SC 29803-2633

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aiken Cardiovascular Associates

Occupation
INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 30 / 2012

Transaction ID : E64D20EA4F60E332926

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Patrick J. Curran M.D., F.A.

Mailing Address 14 Annawamscutt Rd

City State Zip Code
Barrington RI 02806-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
CLINICAL CARDIOLOGY/GENERAL CARDIOI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 03 / 2012

Transaction ID : 48A44875-785E-48AD-

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Peter J. Epstein M.D., F.A.

Mailing Address 3 Clover Dr

City State Zip Code
Great Neck NY 11021-1817

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brookdale Hospital Medical Ctr

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 21 / 2012

Transaction ID : 63FB8D3864B4D0B2A8E

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 OF 72

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Blair D. Erb Jr., M.D.,

Mailing Address 905 Highland Blvd
Ste 4330

City Bozeman State MT Zip Code 59715-6901

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardiology Consultants, P.A.

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1025.00

Date of Receipt

12 / 09 / 2012

Transaction ID : 4D4C9CB829A40EF04178

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. Richard Ericson M.D., F.A.

Mailing Address 2712 Lake Front Ct

City Modesto State CA Zip Code 95355-2262

FEC ID number of contributing
federal political committee.

C

Name of Employer
Valley Heart Assoc. Medical Group

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

12 / 09 / 2012

Transaction ID : 4C6FBC121E0522FCC8CD

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Richard Ericson M.D., F.A.

Mailing Address 2712 Lake Front Ct

City Modesto State CA Zip Code 95355-2262

FEC ID number of contributing
federal political committee.

C

Name of Employer
Valley Heart Assoc. Medical Group

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

12 / 21 / 2012

Transaction ID : 4759AA3F338B95C26652

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 72
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. David M. Evans M.D., F.A.

Mailing Address 130 Ashlei Ln

City

Searcy

State

AR

Zip Code

72143-3024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Clinic Arkansas

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

12 / 09 / 2012

Transaction ID : 4EA4A909E87788D07C27

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Chester J. Falterman M.D., F.A.

Mailing Address 1458 Avellino Cir

City

Murfreesboro

State

TN

Zip Code

37130-7608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1879.96

Date of Receipt

12 / 15 / 2012

Transaction ID : 49C1AEC16B17D2947CDF

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

c. Chester J. Falterman M.D., F.A.

Mailing Address 1458 Avellino Cir

City

Murfreesboro

State

TN

Zip Code

37130-7608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1879.96

Date of Receipt

12 / 25 / 2012

Transaction ID : 4EB1948B88CF8E8FAA50

Amount of Each Receipt this Period

83.33

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

263.33

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 26 OF 72
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. James W. Fasules M.D., F.A.

Mailing Address 2718 Stephenson Ln NW

City

Washington

State

DC

Zip Code

20015-1504

FEC ID number of contributing
federal political committee.

C

Name of Employer

American College of Cardiology

Occupation

PEDIATRIC CARD.

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2000.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2012

Transaction ID : 4468A20A849486DE263C

Amount of Each Receipt this Period

166.67

Full Name (Last, First, Middle Initial)

B. Kevin Fitzpatrick PA-CMailing Address 2400 N St NW
Heart House

City

Washington

State

DC

Zip Code

20037-1153

FEC ID number of contributing
federal political committee.

C

Name of Employer

American College of Cardiology

Occupation

ADMINISTRATION

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	18	/	2012

Transaction ID : 4665B67B077660E26965

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. Ben P. Folk M.D., F.A.

Mailing Address 1502 S Colorado St

City

Greenville

State

MS

Zip Code

38703-7219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greenville Clinic

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	18	/	2012

Transaction ID : 2072F279-B967-4F75-

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

1250.01

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 72
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dennis C. Friedman M.D., F.A.

Mailing Address 10817 Nantucket Ter

City

Potomac

State

MD

Zip Code

20854-4427

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiac Associates, P.C.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 30 / 2012

Transaction ID : FF86317A56AFDDFFC57

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Gordon L. Fung M.D., F.A.

Mailing Address 1837 10th Ave
 # 1609

City

San Francisco

State

CA

Zip Code

94122-4601

FEC ID number of contributing
federal political committee.

C

Name of Employer

UCSF Medical Center at Mt. Zion

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

12 / 07 / 2012

Transaction ID : 427C9C2058A4FB3CE2FC

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

C. Cathy Gates

Mailing Address 17500 Ashton Forest Ter

City

Sandy Spring

State

MD

Zip Code

20860-3009

FEC ID number of contributing
federal political committee.

C

Name of Employer

American College of Cardiology

Occupation

Chief People Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

12 / 18 / 2012

Transaction ID : 422CBC3A4C8D2C567088

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

583.33

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 28 OF 72
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael F. Gilson M.D., F.A.

Mailing Address 100 Prospect St

City

Providence

State

RI

Zip Code

02906-1446

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			03			2012			

Transaction ID : 49FEAFDA2C107B4B33A8

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Lee W. Gould M.D., F.A.

Mailing Address 3865 Country Club Dr

City

Lewiston

State

ID

Zip Code

83501-9622

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			21			2012			

Transaction ID : 4DCDA38F98D780DF0DB7

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

c. Stephen J. Gulotta M.D., F.A.

Mailing Address Elm Court

City

Sands Point

State

NY

Zip Code

11050

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2012			

Transaction ID : 22C7E03BB6E2BAEA2B6

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

283.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 72

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rakesh P. Gupta M.D., F.A.Mailing Address 9033 Springfield Blvd
FL 2

City	State	Zip Code
Queens Village	NY	11428-1352

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2012

Transaction ID : C3CCC6B7331057BFE7E

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dale A. Hansen M.D., F.A.

Mailing Address 5421 S 61st Court

City	State	Zip Code
Lincoln	NE	68516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bryan LGH Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	18	/	2012

Transaction ID : 48F39557C8D718FB1E59

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Katherine Hays M.D., F.A.

Mailing Address 400 Nantucket Blvd

City	State	Zip Code
Norman	OK	73071-7101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2012

Transaction ID : 35E96D475AD345C4CA7

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 OF 72

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. M. Shereef Hilmy M.B.B.S.,

Mailing Address 200 Rio Grande Dr

City

Mission

State

TX

Zip Code

78572-8559

FEC ID number of contributing
federal political committee.

C

Name of Employer

South Heart Clinic, PLLC

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 22 / 2012

Transaction ID : 637A0368-8EBC-4139-

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Jerome L. Hines M.D., Ph.D

Mailing Address 11 Salt Creek Ln
Ste 2

City

Hinsdale

State

IL

Zip Code

60521-3032

FEC ID number of contributing
federal political committee.

C

Name of Employer

Illinois Heart & Vascular

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 21 / 2012

Transaction ID : 465D8EE87C29BEEE1DCB

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

c. Robert E. Hobbs M.D., F.A.

Mailing Address 2713 Dryden Rd

City

Shaker Heights

State

OH

Zip Code

44122-2701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cleveland Clinic

Occupation

HEART FAILURE/TRANSPLANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 21 / 2012

Transaction ID : 4402AEA2E1D4718A45EF

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1166.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 OF 72

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Moongilmadugu N. Inba-Vazhvu M.D., F.A.

Mailing Address 702 Bethpage Dr

City State Zip Code
McDonough GA 30253-4020

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 21 / 2012

Transaction ID : 660CD3EE02E44A06F1A

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Pamela A. Ivey M.D., F.A.

Mailing Address 52 Quail Run Rd

City State Zip Code
Henderson NV 89014-2148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiovascular Consultants of Nevada

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2520.00

Date of Receipt

12 / 21 / 2012

Transaction ID : 4062A4A0077C1C08D250

Amount of Each Receipt this Period

210.00

Full Name (Last, First, Middle Initial)

c. C. David Joffe M.D., F.A.

Mailing Address 7067 Meeker Commons Ln

City State Zip Code
Dayton OH 45414-2065

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dayton Heart Center, Inc.

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 30 / 2012

Transaction ID : 44AFA6862B4459A8AE5A

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

510.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. C. David Joffe M.D., F.A.

Mailing Address 7067 Meeker Commons Ln

City

Dayton

State

OH

Zip Code

45414-2065

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dayton Heart Center, Inc.

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 31 / 2012

Transaction ID : 4C0B83C2576AF4E1117D

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. John M. Johnstone M.D., F.A.

Mailing Address 819 W Main St

City

Richmond

State

KY

Zip Code

40475-1114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

12 / 24 / 2012

Transaction ID : 4AD69515C210CED36B77

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

c. Ronald P. Karlsberg M.D., F.A.

Mailing Address 414 N Camden Dr
Ste 1100

City

Beverly Hills

State

CA

Zip Code

90210-4517

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 30 / 2012

Transaction ID : 3E6E76A241A33CC1CDB

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1075.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Atilla Kayalar M.D., F.A.

Mailing Address 6 Hearts Way

City

Queensbury

State

NY

Zip Code

12804-5925

FEC ID number of contributing
federal political committee.

C

Name of Employer

Adirondack Cardiology Assoc., PC

Occupation

INTERNAL MED.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2012			

Transaction ID : 80A9B4C7731B8E4E981

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

B. Bahij N. Khuri M.D., F.A.

Mailing Address 214 Pecan Meadow Dr

City

Baton Rouge

State

LA

Zip Code

70810-9500

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			12			2012			

Transaction ID : DE180185225B3438145

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

c. Larry E. Kibler M.D., F.A.

Mailing Address 164 Cardinal Ct

City

Chesnee

State

SC

Zip Code

29323-9686

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Consultants, P.A.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2012			

Transaction ID : 6C7B73FF80A60115788

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

980.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. George P. Kinzfolg III, M.D.,

Mailing Address 33 Lettery Cir

99 Lincoln Street

City

Sudbury

State

MA

Zip Code

01776-7400

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Center of MetroWest

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.96

Date of Receipt

12 / 19 / 2012

Transaction ID : 4D6F829BB746041F649C

Amount of Each Receipt this Period

20.83

Full Name (Last, First, Middle Initial)

B. Ronald P. Koepke M.D., F.A.

Mailing Address 102 Thomas Rd

Ste 400

City

West Monroe

State

LA

Zip Code

71291-5549

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 18 / 2012

Transaction ID : CD424EF7-468E-48F9-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Steven E. Kornberg M.D., F.A.

Mailing Address 10 E New York Ave

Ste 2

City

Somers Point

State

NJ

Zip Code

08244-2367

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shore Heart Consultants, LLC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.92

Date of Receipt

12 / 18 / 2012

Transaction ID : 4ACC9838F6720BDD59E7

Amount of Each Receipt this Period

41.66

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

562.49

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jeffrey H. Kramer M.D., F.A.

Mailing Address 311 Munn Ln

City

Cherry Hill

State

NJ

Zip Code

08034-3029

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 30 / 2012

Transaction ID : E8386731FF75FE05770

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. William A. Kutchera M.D., F.A.

Mailing Address 822 Overlook Pl

City

Anchorage

State

AK

Zip Code

99501-3284

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alaska Heart Institute LLC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 30 / 2012

Transaction ID : B4E98A9FFBF96D5273C

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Gilead I. Lancaster M.D., F.A.

Mailing Address 15 Mine Hill Rd

City

Redding

State

CT

Zip Code

06896-2701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bridgeport Hospital Dept of Echo

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 21 / 2012

Transaction ID : 40679F3374FA9D1990B4

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

1600.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael Langiulli M.D., F.A.

Mailing Address 155 Belle Pointe Dr

City

Ruston

State

LA

Zip Code

71270-1692

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

12 / 12 / 2012

Transaction ID : 34826AE057A2CC6DA7B

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

B. David D. Laxson M.D., F.A.

Mailing Address 6405 France Ave S
Ste W200

City

Minneapolis

State

MN

Zip Code

55435-2186

FEC ID number of contributing
federal political committee.

C

Name of Employer

Minnesota Heart Clinic

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 31 / 2012

Transaction ID : 4C0E179631FBEC128E2

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. William Lee M.D., Ph.D

Mailing Address 939 Little Britain Rd

City

New Windsor

State

NY

Zip Code

12553-7210

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Heart Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

12 / 12 / 2012

Transaction ID : 443074AEF1287F9020E

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

980.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thomas J. Lewandowski M.D., F.A.

Mailing Address 113 Limekiln Dr

City

Neenah

State

WI

Zip Code

54956-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Appleton Cardiology ThedaCare

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2350.00

Date of Receipt

12 / 21 / 2012

Transaction ID : 43A7AC26C9E248558996

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Thomas J. Lewandowski M.D., F.A.

Mailing Address 113 Limekiln Dr

City

Neenah

State

WI

Zip Code

54956-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Appleton Cardiology ThedaCare

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2350.00

Date of Receipt

12 / 21 / 2012

Transaction ID : 95BC27A511DEABA35A0

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Sandra J. Lewis M.D., F.A.

Mailing Address 5342 SW Hewett Blvd

City

Portland

State

OR

Zip Code

97221-2254

FEC ID number of contributing
federal political committee.

C

Name of Employer

NW Cardiovascular Institute

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

12 / 09 / 2012

Transaction ID : 483BAE7B29435004D8E1

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

733.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. William R. Lewis M.D., F.A.

Mailing Address 24707 Tricia Dr

City

Westlake

State

OH

Zip Code

44145-4923

FEC ID number of contributing
federal political committee.

C

Name of Employer

Metro Health Medical Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

11 / 30 / 2012

Transaction ID : 485EBB3270DEB02C0B76

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

B. William R. Lewis M.D., F.A.

Mailing Address 24707 Tricia Dr

City

Westlake

State

OH

Zip Code

44145-4923

FEC ID number of contributing
federal political committee.

C

Name of Employer

Metro Health Medical Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

12 / 31 / 2012

Transaction ID : 43519F9492605102E9FD

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

c. Chang S. Lim M.D., F.A.

Mailing Address 5 Vanderbilt Park Dr

City

Asheville

State

NC

Zip Code

28803-1700

FEC ID number of contributing
federal political committee.

C

Name of Employer

Asheville Cardiology Associates, P.A.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 09 / 2012

Transaction ID : E9847E9A-E495-49EA-

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

590.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Christopher Ryan Longnecker M.D., F.A.

Mailing Address 2500A N Loma Linda Dr

City

Loma Linda

State

MO

Zip Code

64804-8864

FEC ID number of contributing
federal political committee.

C

Name of Employer

Freeman Heart and Vascular Institute

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

11 / 30 / 2012

Transaction ID : 53AAD5AD4DD614AA613

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

B. Kathleen E. Magness M.D., F.A.

Mailing Address 3014 Hollow Rd

City

Malvern

State

PA

Zip Code

19355-8660

FEC ID number of contributing
federal political committee.

C

Name of Employer

Clinical Care Associates/ PMA Medical

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 30 / 2012

Transaction ID : D9212EB25C0439FDDA2

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. J. Jeffrey Marshall M.D., F.A.

Mailing Address 200 S Enota Dr NE
Ste 200

City

Gainesville

State

GA

Zip Code

30501-3466

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northeast Georgia Heart Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / 30 / 2012

Transaction ID : E3C626929CE66AAB6E9

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

915.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Edward T. Martin M.D., F.A.Mailing Address 9228 S Mingo Rd
Ste 200City State Zip Code
Tulsa OK 74133-5722FEC ID number of contributing
federal political committee.

C

Name of Employer

Oklahoma Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 21 2012

Transaction ID : B2D05591-64EF-4A75-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mario G. Massullo D.O., F.A.

Mailing Address 1710 W Court St

City State Zip Code
Kankakee IL 60901-3160FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Cardiovascular Services

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 18 2012

Transaction ID : EEA8B039-E41F-46E5-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Viral Y. Mehta M.B.B.S.,

Mailing Address 5945 Truxtun Ave

City State Zip Code
Bakersfield CA 93309-0610FEC ID number of contributing
federal political committee.

C

Name of Employer

Comprehensive Crdvscl Medcl Grp

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 11 2012

Transaction ID : 2A774096B729EF8933D

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lawrence S. Mendelson M.D., F.A.

Mailing Address 537 W Wayne Ave

City
Wayne

State
PA

Zip Code
19087-3863

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 30 / 2012

Transaction ID : BB991550561E80175ED

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Lawrence S. Mendelson M.D., F.A.

Mailing Address 537 W Wayne Ave

City
Wayne

State
PA

Zip Code
19087-3863

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 31 / 2012

Transaction ID : 22B4AB2DBCC175DD8A1

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Margo B. Minissian ACNP-BC, M

Mailing Address 444 S San Vicente Blvd
Ste 600

City
Los Angeles

State
CA

Zip Code
90048-4174

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cedars Sinai Heart Institute Womens He

Occupation

PREVENTIVE CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.74

Date of Receipt

11 / 29 / 2012

Transaction ID : 4CAD85C1CA82A89B2282

Amount of Each Receipt this Period

208.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

708.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 72

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Margo B. Minissian ACNP-BC, MMailing Address 444 S San Vicente Blvd
Ste 600

City	State	Zip Code
Los Angeles	CA	90048-4174

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cedars Sinai Heart Institute Womens He

Occupation

PREVENTIVE CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2012

Transaction ID : 48588B00B6EE0E3CD730

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

B. Dalton J. Miranda M.D., F.A.

Mailing Address 1236 Autumn Ln

City	State	Zip Code
Petoskey	MI	49770-9019

FEC ID number of contributing
federal political committee.

C

Name of Employer

Michigan Heart and Vascular Specialist

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	21	/	2012

Transaction ID : 05ED808347C64B511B5

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

c. Pramod K. Mohanty M.B.B.S.,

Mailing Address 311 Victoria Way

City	State	Zip Code
Richmond	VA	23238-7117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mohanty Consulting

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	19	/	2012

Transaction ID : 5344985C-A7ED-4E5F-

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

823.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pradip J. Morbia M.B.B.S.,

Mailing Address 330 Meadowgreen Dr

City

Port Neches

State

TX

Zip Code

77651-5426

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gulf Coast Cardiology Group P.L.L.C

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 17 / 2012

Transaction ID : 22D8D55F0E273AF7778

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Marc A. Mugmon M.D., F.A.

Mailing Address 7193 Collingwood Ct

City

Elkridge

State

MD

Zip Code

21075-5548

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chesapeake CardioVascular Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 30 / 2012

Transaction ID : 4199A565AEE72487BF25

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

c. Marc A. Mugmon M.D., F.A.

Mailing Address 7193 Collingwood Ct

City

Elkridge

State

MD

Zip Code

21075-5548

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chesapeake CardioVascular Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2012

Transaction ID : 46F5A1C0E1771C288944

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

666.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 44 OF 72

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Frances C. Munkenbeck M.D., F.A.

Mailing Address 1880 Orchard St

City

Eugene

State

OR

Zip Code

97403-2169

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oregon Cardiology, PC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

11 / 30 / 2012

Transaction ID : 57EF9E42B28B14700F0

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. John P. Nagle Jr., M.D.,

Mailing Address 742 Berg Ct NW

City

Gig Harbor

State

WA

Zip Code

98335-7718

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

12 / 31 / 2012

Transaction ID : 3DE330A57488F452ECF

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

c. Patrick T. O'Gara M.D., F.A.

Mailing Address 75 Francis St

Cardiovascular Division

City

Boston

State

MA

Zip Code

02115-6110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Brigham and Women's Hospital

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

11 / 29 / 2012

Transaction ID : 02AA7AE2-85B8-4EF3-

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

715.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 72
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thomas C. Passo M.D., F.A.

Mailing Address 1318 Clarkstown Rd

City State Zip Code
 Bardstown KY 40004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Cardiologists

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 30 / 2012

Transaction ID : 1C4C9FDD2D5B3F942DA

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Gaetano N. Pastore M.D., F.A.

Mailing Address 1 Centurian Dr
 Ste 200

City State Zip Code
 Newark DE 19713-2150

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Physicians, P.A.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 26 / 2012

Transaction ID : 2DC0923E-8A0E-4488-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Vaughn W. Payne M.D., F.A.

Mailing Address 145 Hager Ln

City State Zip Code
 Staffordsville KY 41256-9144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kentucky Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 29 / 2012

Transaction ID : 4F2E8DE66D630E4281C9

Amount of Each Receipt this Period

83.33

SUBTOTAL of Receipts This Page (optional)..... ►

1083.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Vaughn W. Payne M.D., F.A.

Mailing Address 145 Hager Ln

City

Staffordsville

State

KY

Zip Code

41256-9144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kentucky Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2012

Transaction ID : 414581E964BC7014B09E

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. Joel M. Phares M.D.

Mailing Address 5516 Hawks Landing Dr

City

Arrington

State

TN

Zip Code

37014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

INVASIVE CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 30 / 2012

Transaction ID : DA0FB4D79E5A6DCF7E3

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

C. John W. Pickrell M.D., F.A.

Mailing Address 1909 Elkhorn Valley Dr

City

Casper

State

WY

Zip Code

82609-4620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wyoming CardioPulmonary

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

985.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 18 / 2012

Transaction ID : 4711AA7E4154130A3C53

Amount of Each Receipt this Period

85.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

918.33

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 47 OF 72
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Joseph F. Pietrolungo D.O., F.A.Mailing Address 95 Arch St
Ste 350

City	State	Zip Code
Akron	OH	44304-2201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northeast Ohio Cardiovascular Speciali

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2012

Transaction ID : 4B5EA4F1-CA48-49BD-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. David J. Pinnelas M.D., F.A.

Mailing Address 2 Hopi Ct

City	State	Zip Code
Manalapan	NJ	07726-4628

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shore Heart Group

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2012

Transaction ID : 4CA19DBBDDC61DDEF7B1

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

C. Srinivas Prasad M.D., F.A.

Mailing Address 6695 Arroyo Dr

City	State	Zip Code
Viera	FL	32940-8514

FEC ID number of contributing
federal political committee.

C

Name of Employer

Brevard Cardiology

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2012

Transaction ID : F3342CDE879EB26B687

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)..... ►

935.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael E. Ring M.D., F.A.Mailing Address 122 W 7th Ave
Ste 450

City	State	Zip Code
Spokane	WA	99204-2339

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Clinics Northwest

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	21	/	2012

Transaction ID : 40A3B83D0F343362B082

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Thomas F. Rizzo M.D., F.A.

Mailing Address 203 Hillcrest Ave

City	State	Zip Code
Neptune	NJ	07753-5730

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2012

Transaction ID : B29368BD5051CB062A0

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

C. John F. Robb M.D., F.A.

Mailing Address 1 Medical Center Dr

City	State	Zip Code
Lebanon	NH	03756-1000

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dartmouth-Hitchcock Medcl Ctr

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	18	/	2012

Transaction ID : 0A0ACD46-3A3B-44BB-

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

698.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 72
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. George P. Rodgers M.D., F.A.

Mailing Address 11673 Jollyville Rd
Ste 205-B

City State Zip Code
Austin TX 78759-4200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.06

Date of Receipt

M M / D D / Y Y Y Y Y
12 01 2012

Transaction ID : 4B42BED044B8040995F6

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. George P. Rodgers M.D., F.A.

Mailing Address 11673 Jollyville Rd
Ste 205-B

City State Zip Code
Austin TX 78759-4200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.06

Date of Receipt

M M / D D / Y Y Y Y Y
12 23 2012

Transaction ID : 46CB94168C2226384289

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

C. David A. Rosenbaum M.D., F.A.

Mailing Address 3625 Cherry Plum Dr

City State Zip Code
Colorado Springs CO 80920-2826

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pikes Peak Cardiology

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.08

Date of Receipt

M M / D D / Y Y Y Y Y
12 21 2012

Transaction ID : 4A708BD0759413D1B925

Amount of Each Receipt this Period

208.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

375.01

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 50 OF 72

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Howard S. Rubin M.D., F.A.

Mailing Address 6400 Fannin St
Ste 3000

City State Zip Code
Houston TX 77030-1527

FEC ID number of contributing
federal political committee.

C

Name of Employer
Houston Cardiovascular Associates

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

12 / 18 / 2012

Transaction ID : 5354E3A8-EA9B-41BF-

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. John S. Rumsfeld M.D., Ph.D

Mailing Address 250 S Dahlia St

City State Zip Code
Denver CO 80246-1049

FEC ID number of contributing
federal political committee.

C

Name of Employer
Denver VA Medical Center, University o

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

12 / 25 / 2012

Transaction ID : 40EAA6DCA346118F6D3F

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

c. Mark L. Sanz M.D., F.A.

Mailing Address 500 W Broadway St
St. Patrick Hospital

City State Zip Code
Missoula MT 59802-4008

FEC ID number of contributing
federal political committee.

C

Name of Employer
International Heart Institute of Monta

Occupation
INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 03 / 2012

Transaction ID : C4DFB564-33B7-43EE-

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1333.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael K. Schroyer RN, A.A.C.

Mailing Address 9065 Pebblepoint Cir

City

Zionsville

State

IN

Zip Code

46077-8992

FEC ID number of contributing
federal political committee.

C

Name of Employer

Saint Vincent Heart Center of Indiana

Occupation

ADMINISTRATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1056.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2012

Transaction ID : 4BC7B3CED76188107B68

Amount of Each Receipt this Period

88.00

Full Name (Last, First, Middle Initial)

B. Harvey A. Schuchman M.D., F.A.

Mailing Address 5328 S Havana Ct

City

Englewood

State

CO

Zip Code

80111-3816

FEC ID number of contributing
federal political committee.

C

Name of Employer

South Denver Cardiology Assoc PC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 30 / 2012

Transaction ID : 57568F612B703E14B4F

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. John E. Seibel Jr., M.D.,

Mailing Address PO Box 1544

City

Grenada

State

MS

Zip Code

38902-1544

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 19 / 2012

Transaction ID : 7B4B5959-674E-49F3-

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1088.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. John E. Seibel Jr., M.D.,

Mailing Address PO Box 1544

City

Grenada

State

MS

Zip Code

38902-1544

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 19 / 2012

Transaction ID : FC1ECD0A-963C-44F3-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Timothy J. Shanahan D.O., F.A.

Mailing Address 8714 Spur Ln

City

Easton

State

MD

Zip Code

21601-1202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chesapeake Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.79

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 29 / 2012

Transaction ID : 4507A0533160A429F91A

Amount of Each Receipt this Period

20.83

Full Name (Last, First, Middle Initial)

c. Timothy J. Shanahan D.O., F.A.

Mailing Address 8714 Spur Ln

City

Easton

State

MD

Zip Code

21601-1202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chesapeake Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.79

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 29 / 2012

Transaction ID : 48B58620ECE8FB02BBFB

Amount of Each Receipt this Period

20.83

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

541.66

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 53 OF 72
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. John W. Shuck M.D., F.A.

Mailing Address 1100 Forrest Ave

City
DoverState
DEZip Code
19904-3309FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Consultants

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2084.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	26	/	2012

Transaction ID : 4A4E9EAE4DE9C7FFAF28

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Kevin H. Silver M.D., F.A.

Mailing Address 2455 Londonderry Dr

City
AkronState
OHZip Code
44333-2946FEC ID number of contributing
federal political committee.

C

Name of Employer

Akron Cardiology Consultants Inc

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	17	/	2012

Transaction ID : 6E1FE2219FB5B93858B

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Christian Simpfendorfer M.D., F.A.

Mailing Address 16309 Forest Light Dr

City
Colorado SpringsState
COZip Code
80908-2077FEC ID number of contributing
federal political committee.

C

Name of Employer

Colorado Springs Cardiologists, PC

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	11	/	2012

Transaction ID : 5BFF4CE5B2FF7F02D89

Amount of Each Receipt this Period

700.00

SUBTOTAL of Receipts This Page (optional)..... ►

1450.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 54 OF 72
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Narendra Singh M.D., F.A.

Mailing Address 6350 Haddington Ln

City

Johns Creek

State

GA

Zip Code

30024-5304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Atlanta Heart Specialists

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1141.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2012

Transaction ID : 45B78C1367EC28B531E4

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Ahmad M. Slim M.D., F.A.

Mailing Address 14214 Turtle Rock St

City

San Antonio

State

TX

Zip Code

78232-4434

FEC ID number of contributing
federal political committee.

C

Name of Employer

Brooke Army Medical CtrMCHE-MDC Cardio

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2012

Transaction ID : 1068C877B33B32929AE

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

C. David Lawrence Smull D.O., F.A.

Mailing Address 3417 Jameson Ln

City

Winston Salem

State

NC

Zip Code

27106-4772

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Failure Program at Forsyth Medic

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2012

Transaction ID : D07FF2728933A7BDB1C

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

965.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. D. Gary Soya M.D., F.A.

Mailing Address PO Box 51624

City

Amarillo

State

TX

Zip Code

79159-1624

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 30 / 2012

Transaction ID : 5315F1E8DB9CADEE28D

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Michael J. Springer M.D., F.A.

Mailing Address 803 Towner Pl

City

Louisville

State

KY

Zip Code

40223-2568

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Cardiologists

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.92

Date of Receipt

12 / 25 / 2012

Transaction ID : 45B584713DB435266654

Amount of Each Receipt this Period

41.66

Full Name (Last, First, Middle Initial)

c. A. Wade Strickland M.D., F.A.

Mailing Address 105 River Way

City

Brunswick

State

GA

Zip Code

31520-1365

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 30 / 2012

Transaction ID : 97093DE8C476E6B8894

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1041.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. John S. Strobel M.D., F.A.

Mailing Address 3407 E Olcott Blvd

City

Bloomington

State

IN

Zip Code

47401-2429

FEC ID number of contributing
federal political committee.

C

Name of Employer

Internal Medicine Associates

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 12 / 2012

Transaction ID : C611B18DAED7548EE5D

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Margaret M. Sullivan M.D., F.A.

Mailing Address 501 N Preston St

City

Ennis

State

TX

Zip Code

75119-3928

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIOI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2012

Transaction ID : A3B44F177303745F99C

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Clarence S. Thomas Jr., M.D.,

Mailing Address 425 Westview Ave

City

Nashville

State

TN

Zip Code

37205-3442

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

CRITICAL CARE MEDICINE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2012

Transaction ID : CF81BC15D5B4CABC0AA

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1115.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Suma A. Thomas M.D., F.A.

Mailing Address 7620 Old Georgetown Rd
Apt 1214

City State Zip Code
Bethesda MD 20814-6182

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.06

Date of Receipt

11 / 28 / 2012

Transaction ID : 43D0BB8BB695B1FE1A8F

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

B. Suma A. Thomas M.D., F.A.

Mailing Address 7620 Old Georgetown Rd
Apt 1214

City State Zip Code
Bethesda MD 20814-6182

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.06

Date of Receipt

12 / 28 / 2012

Transaction ID : 49BA9C5398AE3D70BF56

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

c. Edward J. Toggart M.D., F.A.

Mailing Address 3600 NW Samaritan Dr
Ste E350

City State Zip Code
Corvallis OR 97330-3737

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Samaritan Heart & Vascular Institute

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 19 / 2012

Transaction ID : BA99B13D-F238-4909-

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

916.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rangarao V. Tummala M.B.B.S.,

Mailing Address 9712 W 147th St

Doctor's Building #2

City

Shawnee Mission

State

KS

Zip Code

66221-9678

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Services

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 31 / 2012

Transaction ID : 70BDF081E148DE8A943

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Krishnaswami Vijayaraghavan M.B.B.S.

Mailing Address 2817 E Ludlow Dr

City

Phoenix

State

AZ

Zip Code

85032-5665

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

12 / 21 / 2012

Transaction ID : 4905B41494032A23047A

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. Juan Villafane M.D., F.A.

Mailing Address 1400 Willow Ave

1205

City

Louisville

State

KY

Zip Code

40204-2506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

PEDIATRICS

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

916.74

Date of Receipt

12 / 01 / 2012

Transaction ID : 4FA6995DCCCA68554D6B

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

416.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thad F. Waites M.D., F.A.

Mailing Address 1017 Richburg Rd

City

Hattiesburg

State

MS

Zip Code

39402-9055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southern Heart Center

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2500.08

Date of Receipt

12 / 21 / 2012

Transaction ID : 4391891FAB435832B49B

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Kirk W. Walker M.D., F.A.

Mailing Address 2974 Dogwood Dr S

City

Salem

State

OR

Zip Code

97302-4063

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cascade Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 30 / 2012

Transaction ID : 7D98AD6F045BD920233

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Steven S. Walker M.D., F.A.

Mailing Address 1926 Collingswood Rd

City

Columbus

State

OH

Zip Code

43221-3740

FEC ID number of contributing
federal political committee.

C

Name of Employer

Columbus Cardiology Consultants Inc

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 12 / 2012

Transaction ID : 8D34ED337021BA57E0C

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

583.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 60 OF 72

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Steven S. Walker M.D., F.A.

Mailing Address 1926 Collingswood Rd

City

Columbus

State

OH

Zip Code

43221-3740

FEC ID number of contributing
federal political committee.

C

Name of Employer

Columbus Cardiology Consultants Inc

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 12 / 2012

Transaction ID : B6FDDDB47298B0FE4276

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Howard T. Walpole Jr., M.D.,

Mailing Address 31 Northumberland

City

Nashville

State

TN

Zip Code

37215-4123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.04

Date of Receipt

12 / 09 / 2012

Transaction ID : 4895ADE332BFAA5E9256

Amount of Each Receipt this Period

416.67

Full Name (Last, First, Middle Initial)

c. Mary Norine Walsh M.D., F.A.

Mailing Address 428 W 83rd PI

City

Indianapolis

State

IN

Zip Code

46260-4905

FEC ID number of contributing
federal political committee.

C

Name of Employer

St Vincent Heart Center of Indiana

Occupation

HEART FAILURE/TRANSPLANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

11 / 29 / 2012

Transaction ID : 4C448182414141153B7

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

766.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mary Norine Walsh M.D., F.A.

Mailing Address 428 W 83rd Pl

City

Indianapolis

State

IN

Zip Code

46260-4905

FEC ID number of contributing
federal political committee.

C

Name of Employer

St Vincent Heart Center of Indiana

Occupation

HEART FAILURE/TRANSPLANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

12 / 29 / 2012

Transaction ID : 4152AFC44F660E2FC7D7

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Bruce A. Watt M.D., F.A.

Mailing Address 2109 S Main Ave

City

Sioux Falls

State

SD

Zip Code

57105-3827

FEC ID number of contributing
federal political committee.

C

Name of Employer

North Central Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

12 / 21 / 2012

Transaction ID : 4ED68A0ED0E2B450BC6B

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

c. Henry L. Weiner M.D., F.A.

Mailing Address 17 Raintree Rd

City

Chadds Ford

State

PA

Zip Code

19317-9330

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 30 / 2012

Transaction ID : B052604646CBADEC3E6

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

683.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. William S. Weintraub M.D., F.A.

Mailing Address 4755 Ogletown Stanton Rd

City

Newark

State

DE

Zip Code

19718-2200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Christiana Care Health System

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 30 / 2012

Transaction ID : 71014289DE774135E97

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Robert C. Wesley Jr., M.D.,

Mailing Address 8841 Montagna Dr

City

Las Vegas

State

NV

Zip Code

89134-6148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1008.00

Date of Receipt

12 / 21 / 2012

Transaction ID : 46BD9E3F77E512635455

Amount of Each Receipt this Period

84.00

Full Name (Last, First, Middle Initial)

c. John Jason West M.D.

Mailing Address 3322 NW Panorama Dr

City

Bend

State

OR

Zip Code

97701-5461

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bend Memorial Clinic

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

499.92

Date of Receipt

12 / 11 / 2012

Transaction ID : 4FB4A48447977AAD1026

Amount of Each Receipt this Period

41.66

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

375.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Steven R. West M.D., F.A.

Mailing Address 3701 S Poplar Dr

City
Columbus

State
IN

Zip Code
47201-4972

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Vincent Medical Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.02

Date of Receipt

11 / 30 / 2012

Transaction ID : 452390CAA9B46A51D3F5

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

B. Steven R. West M.D., F.A.

Mailing Address 3701 S Poplar Dr

City
Columbus

State
IN

Zip Code
47201-4972

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Vincent Medical Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.02

Date of Receipt

12 / 31 / 2012

Transaction ID : 4BE2A6A90C4CB0C50C16

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

c. Steven S. Whitfield M.D., F.A.

Mailing Address 4905 W 132nd St

City
Leawood

State
KS

Zip Code
66209-3468

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Services Doctors Bldg No 2

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 30 / 2012

Transaction ID : 53709103F4B82801310

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

333.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael C. Widmer M.D., F.A.

Mailing Address 2753 NE Red Oak Dr

City

State

Zip Code

Bend

OR

97701-8348

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Center Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

999.96

Date of Receipt

11 / 29 / 2012

Transaction ID : 47478E95114777CB96AA

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. Michael C. Widmer M.D., F.A.

Mailing Address 2753 NE Red Oak Dr

City

State

Zip Code

Bend

OR

97701-8348

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Center Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

999.96

Date of Receipt

12 / 29 / 2012

Transaction ID : 404CAF0D81BDA0ED5558

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

C. Thomas M. Wiley M.D., F.A.

Mailing Address 990 19th Ave NW

City

State

Zip Code

Hickory

NC

28601-1222

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

365.00

Date of Receipt

12 / 12 / 2012

Transaction ID : C01F8E22C8D1F7FE3BF

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)..... ►

531.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 65 OF 72
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael J. Wolk M.D., M.A.

Mailing Address 876 Park Ave

City

New York

State

NY

Zip Code

10075-1832

FEC ID number of contributing
federal political committee.

C

Name of Employer

New York Cardiology Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2012

Transaction ID : 4C798359767E9756D73D

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. Richard F. Wright M.D., F.A.

Mailing Address 1038 S Carmelina Ave

City

Los Angeles

State

CA

Zip Code

90049-5810

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2012

Transaction ID : 42FAAF3100E367A767B1

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Richard F. Wright M.D., F.A.

Mailing Address 1038 S Carmelina Ave

City

Los Angeles

State

CA

Zip Code

90049-5810

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2012

Transaction ID : 46B5A345BB2DF6086EB8

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

625.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lambert A. Wu M.D., F.A.

Mailing Address 1524 NW Grove Ave

City

Topeka

State

KS

Zip Code

66606-1234

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cotton O'Neil Heart Center

Occupation

ECHOCARDIOLOGY/ECHOCARDIOGRAPHY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

916.74

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			19			2012			

Transaction ID : 43318C7375029243F97E

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Janet Fredal Wyman MSN, NP, A

Mailing Address 960 Westchester Rd

City

Grosse Pointe Park

State

MI

Zip Code

48230-1830

FEC ID number of contributing
federal political committee.

C

Name of Employer

Henry Ford Hospital

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIOI

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2012			

Transaction ID : 426F99D3B941DB7C5CAD

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

c. Janet Fredal Wyman MSN, NP, A

Mailing Address 960 Westchester Rd

City

Grosse Pointe Park

State

MI

Zip Code

48230-1830

FEC ID number of contributing
federal political committee.

C

Name of Employer

Henry Ford Hospital

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIOI

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			28			2012			

Transaction ID : 4F9B890C378DE9AC58FC

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

250.02

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Vidya B. Yalamanchi M.B.B.S.,

Mailing Address 200 Medical Center Dr
Ste 2A

City State Zip Code
Hazard KY 41701-9422

FEC ID number of contributing
federal political committee.

C

Name of Employer

Appalachian Heart Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 12 / 2012

Transaction ID : C36EED3703A285C58D5

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Billy K. Yeh M.D., Ph.D

Mailing Address 13145 Old Cutler Rd

City State Zip Code
Miami FL 33156-7215

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 11 / 2012

Transaction ID : BC55F3C00D3FC568B20

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00

52731.32

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. American College of Cardiology - Admin Account

Mailing Address P.O. Box 85024

City
Richmond

State
VA

Zip Code
23285-5024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

21000.14

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 13 / 2012

Transaction ID : 51B2E2AF563594CA815

Amount of Each Receipt this Period

1275.12

Reimbursement for November Amex Fees and
December Merchant Fees

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1275.12

1275.12

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City State Zip Code
Phoenix AZ 85072-3852
Purpose of Disbursement
November 2012 Amex Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 30 2012

Transaction ID : V0AE4C3B2B02BAA9F0C1

Amount of Each Disbursement this Period

124.36

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 53852

City State Zip Code
Phoenix AZ 85072-3852
Purpose of Disbursement
December 2012 Amex Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 31 2012

Transaction ID : V6866E55FFBFE14F3860

Amount of Each Disbursement this Period

205.27

Full Name (Last, First, Middle Initial)

C. Wells Fargo, N.A.Mailing Address C/O Nova Information Systems
7300 Chapman Hwy
City State Zip Code
Knoxville TN 37920
Purpose of Disbursement
December 2012 Merchant Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 03 2012

Transaction ID : M8B761007CECE53E2686

Amount of Each Disbursement this Period

1150.76

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1480.39

1480.39

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. America's Leadership PACMailing Address 700 13th Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
2012 Contribution

Candidate Name

America's Leadership PACOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2012

Transaction ID : BBFDEF8E02A239EEA17

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. BADGERPAC

Mailing Address PO Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement
2012 Contribution

Candidate Name

BADGERPACOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2012

Transaction ID : 485859EABE1EE2F8E97

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Doc PAC

Mailing Address 2470 Daniell's Bridge Rd Ste 121

City Athens State GA Zip Code 30606

Purpose of Disbursement
2012 Contribution

Candidate Name

Doc PACOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2012

Transaction ID : 82119002BB2C2BB3C8E

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. JOEPAC

Mailing Address 223 W Franklin St

City	State	Zip Code
Ephrata	PA	17522

Purpose of Disbursement
2012 Contribution

011

Candidate Name

JOEPAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2012

Transaction ID : 7C93D657170CC2DF444

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. SKIPAC

Mailing Address PO Box 83142

City	State	Zip Code
Gaithersburg	MD	20883-3142

Purpose of Disbursement
2012 Contribution

011

Candidate Name

SKIPAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2012

Transaction ID : F1F1E2FD7AD6D87B886

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Trust PAC Team Republicans for Utilizing Sensible TacticsMailing Address 228 S. Washington Street
Suite 115

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
2012 Contribution

011

Candidate Name

Trust PAC Team Republicans for Utilizing Sensible Tactics

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2012

Transaction ID : 3E4222CFC4F823ACFF6

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15000.00

30000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. James L. Comazzi M.D., F.A.Mailing Address 900 Greenley Rd
Ste 911

City Sonora State CA Zip Code 95370-5287

Purpose of Disbursement
Refund

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2012

Transaction ID : 8DA8DE1B1CE60AC5CD0

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. James L. Comazzi M.D., F.A.Mailing Address 900 Greenley Rd
Ste 911

City Sonora State CA Zip Code 95370-5287

Purpose of Disbursement
Refund

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2012

Transaction ID : B7E18FDE57960B50B03

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. John E. Seibel Jr., M.D.,

Mailing Address PO Box 1544

City Grenada State MS Zip Code 38902-1544

Purpose of Disbursement
Refund

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2012

Transaction ID : E7121C3EB15EA7E4E60

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00

2500.00
